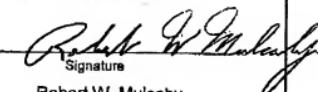


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<b>REQUEST FOR ORAL HEARING BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>APPM/006877/PPC/CMP/CKIM</b>							
<p>I hereby certify that this correspondence is being deposited on with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or electronically transmitted to the U.S. Patent and Trademark Office via EFS-Web to the attention of Examiner Nicholas A. Smith, on <u>January 9, 2007</u>.</p> <p>Signature </p> <p>Typed or printed Name <u>Steven H. VerSteeg</u></p>		<p>In re Application of <b>Sun, et al.</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number <b>10/611,805</b></td> <td style="width: 50%;">Filed <b>June 30, 2003</b></td> </tr> <tr> <td colspan="2" style="text-align: center;">For <b>Effective Method to Improve Surface Finish in Electrochemical Assisted CMP</b></td> </tr> <tr> <td style="width: 50%;">Art Unit <b>1742</b></td> <td style="width: 50%;">Examiner <b>Nicholas A. Smith</b></td> </tr> </table>		Application Number <b>10/611,805</b>	Filed <b>June 30, 2003</b>	For <b>Effective Method to Improve Surface Finish in Electrochemical Assisted CMP</b>		Art Unit <b>1742</b>	Examiner <b>Nicholas A. Smith</b>
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Art Unit <b>1742</b>	Examiner <b>Nicholas A. Smith</b>								
<p>Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.</p>									
<p>The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3))</p>		<b>\$ 1000.00</b>							
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <b>\$ _____</b></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card, Form PTO-2036 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-1074/006877/PPC/CMP/CKIM</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.560.</p>									
<p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2036.</b></p>									
<p>I am the</p> <p><input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p> <p><input type="checkbox"/> attorney or agent of record. Registration number <u>25,438</u>.</p> <p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34: _____.</p>		<p> Signature <b>Robert W. Mulcahy</b> Typed or printed name</p> <p><b>713-623-4844</b> Telephone number</p> <p><b>January 9, 2007</b> Date</p>							
<p><b>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</b></p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>									

This collection of information is required by 37 CFR 41.20(b)(3). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11, 1.14 and 41.6. This collection is estimated to take 12 minutes to complete. Including, gathering, preparing, and sending the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REQUEST FOR ORAL HEARING  
BEFORE

THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number (Optional)

APPM/006877/PPC/CMP/CKIM

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Signature 

Typed or printed

Name Steven H. VerSteeg

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The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3))

\$ 1000.00

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$       

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1074/006877/PPC/CMP/CKIM. I have enclosed a duplicate copy of this sheet.

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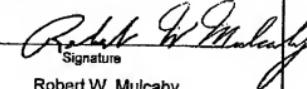
I am the

applicant/inventor.

assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/96)

attorney or agent of record.  
Registration number 25,436.

attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34: \_\_\_\_\_.

  
 Signature  
 Robert W. Mulcahy  
 Typed or printed name

 713-623-4844  
 Telephone number

January 9, 2007

Date

**NOTE:** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below.

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